

<b>United States Bankruptcy Court</b> <b>Middle District of North Carolina</b>				<b>CHAPTER 13</b> <b>VOLUNTARY PETITION</b>	
IN RE (Name of debtor – If individual, enter Last, First, Middle)			NAME OF JOINT DEBTOR (Spouse) (Last, First, Middle)		
ALL OTHER NAMES used by the debtor in the last 6 years (including married, maiden, and trade names)			ALL OTHER NAMES used by the joint debtor in the last 6 years (including married, maiden, and trade names)		
SOC.SEC./TAX I.D. NO. (If more than one, state all)			SOC.SEC./TAX I.D. NO. (If more than one, state all)		
STREET ADDRESS OF DEBTOR (No. and street, city, state and zip code)			STREET ADDRESS OF JOINT DEBTOR (No. and street, city, state and zip code)		
TELEPHONE NO.		COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS	TELEPHONE NO.		COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS
MAILING ADDRESS OF DEBTOR (If different from street address)			MAILING ADDRESS OF JOINT DEBTOR (If different from street address)		
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from address listed above)			<b>VENUE (Check one box)</b> <input type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.		
BUSINESS TELEPHONE NO.					
<b>INFORMATION REGARDING DEBTOR (Check applicable boxes)</b>					
<b>TYPE OF DEBTOR</b> <input type="checkbox"/> Individual <input type="checkbox"/> Joint (Husband and Wife)			<b>FILING FEE (Check one box)</b> <input type="checkbox"/> Filing Fee Attached <input type="checkbox"/> Filing fee to be paid in installments. (Applicable to individuals only.) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.		
<b>NATURE OF DEBT</b> <input type="checkbox"/> Non-Business/Consumer <input type="checkbox"/> Business – Complete A & B below			<b>NAME AND ADDRESS OF ATTORNEY</b>  Telephone No. _____ N.C. State Bar No. _____		
<b>A. TYPE OF BUSINESS (Check one)</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Farming</div> <div style="width: 33%;"><input type="checkbox"/> Transportation</div> <div style="width: 33%;"><input type="checkbox"/> Commodity Broker</div> <div style="width: 33%;"><input type="checkbox"/> Professional</div> <div style="width: 33%;"><input type="checkbox"/> Manufacturing/</div> <div style="width: 33%;"><input type="checkbox"/> Construction</div> <div style="width: 33%;"><input type="checkbox"/> Retail/Wholesale</div> <div style="width: 33%;"><input type="checkbox"/> Mining</div> <div style="width: 33%;"><input type="checkbox"/> Real Estate</div> <div style="width: 33%;"><input type="checkbox"/> Railroad</div> <div style="width: 33%;"><input type="checkbox"/> Stockbroker</div> <div style="width: 33%;"><input type="checkbox"/> Other Business</div> </div>			<input type="checkbox"/> Debtor is not represented by an attorney		
<b>B. NAME AND BRIEF DESCRIPTION OF NATURE OF BUSINESS</b>					
<b>STATISTICAL/ADMINISTRATIVE INFORMATION (U.S.C. § 604)</b> <b>(Estimates Only) (Check applicable boxes)</b>				<b>THIS SPACE FOR COURT USE ONLY</b>	
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					
<b>ESTIMATED NUMBER OF CREDITORS</b>					
1-15 <input type="checkbox"/>	16-49 <input type="checkbox"/>	50-99 <input type="checkbox"/>	100-199 <input type="checkbox"/>	200-999 <input type="checkbox"/>	1000-over <input type="checkbox"/>
<b>ESTIMATED ASSETS (In thousands of dollars)</b>					
Under 50 <input type="checkbox"/>	50-99 <input type="checkbox"/>	100-499 <input type="checkbox"/>	500-999 <input type="checkbox"/>	1000-9999 <input type="checkbox"/>	10,000-99,000 <input type="checkbox"/>
<b>ESTIMATED LIABILITIES (In thousands of dollars)</b>					
Under 50 <input type="checkbox"/>	50-99 <input type="checkbox"/>	100-499 <input type="checkbox"/>	500-999 <input type="checkbox"/>	1000-9999 <input type="checkbox"/>	10,000-99,000 <input type="checkbox"/>

REQUEST FOR RELIEF

The Debtor is an individual with regular income who owes, as of the date of the filing of this petition, noncontingent, liquidated, unsecured debts of less than \$290,525.00 and noncontingent liquidated secured debts of less than \$871,550.00 and hereby requests relief in accordance with Chapter 13 of Title 11, United States Code.

Annexed hereto are schedules which set forth accurate descriptions and valuations of all the items of property, real and personal and a complete statement of all debts with the full names and addresses of all creditors.

SIGNATURES

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
Attorney for Debtor(s)

(I) (We) \_\_\_\_\_, declare under penalty of perjury that the information provided in this petition and schedules attached hereto is true and correct to the best of my knowledge, information and belief and that I am aware that I may proceed under Chapters 7 and 11 of Title 11, United States Code, understand the relief available under such Chapters and choose to proceed under Chapter 13.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
Debtor

Signed: \_\_\_\_\_  
(Joint Debtor, if any)

AFFIDAVIT OF ATTORNEY

I, the undersigned attorney for the Debtor(s) named in the foregoing petition, declare that I have informed the Debtor(s) that the Debtor(s) may proceed under Chapters 7, 11 or 13 of Title 11, United States Code, and have explained the relief available under each such chapter.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
Attorney for Debtor(s)

NOTE: Petition with schedules are filed in duplicate (Only the original needs to be signed with all copies conformed) with the U.S. Bankruptcy Court with the filing fee. A joint petition requires only one filing fee.

SCHEDULE A  
REAL PROPERTY AND MOBILE HOME

<u>Description</u>	<u>Name and Address</u> <u>Of Lienholder</u>	<u>Total Amount</u> <u>Of Debt</u>	<u>Monthly</u> <u>Payment</u>	<u>Present Market</u> <u>Value Without</u> <u>Deduction For</u> <u>Mortgage Or</u> <u>Security Interest</u>
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Total of A \$\_\_\_\_\_

SCHEDULE B

PERSONAL PROPERTY

Type of Property	Amount of Mortgage Or Other Security Interest on This Property	Name of Creditor Abbreviate - Full Name & Address Must Be on List of Debts	Present Market Value Without Deduction For Mortgage or Security Interest
<u>Automobiles or Other Vehicles - Give Year and Make</u>			
<u>Household Goods</u>			
<u>Personal Effects</u>			
<u>Other (Specify)</u>			
<u>Tax Refunds</u> Indicate what tax refunds (income or other), if any, to which either you or your spouse are entitled (give particulars including information as to any refunds payable jointly with any other person).			
<u>Bank Accounts and Safe Deposit Boxes</u> If you or your spouse currently have any bank or savings and loan accounts, checking, or savings, give name and address of bank, nature of account, current balance, name and address of each person authorized to make withdrawals from the account (if none, so state).			
Total of B			\$

THE LIQUIDATION VALUE OF DEBTOR'S ESTATE AFTER DEDUCTING MORTGAGES AND OTHER VALID LIENS IS APPROXIMATELY \$\_\_\_\_\_.

SCHEDULE C  
PROPERTY CLAIMED AS EXEMPT

Use Local Form 91-C to claim property exemptions. A separate form is to be filed for each Debtor. Copies of Form 91-C are available from the Clerk of the Bankruptcy Court.

SCHEDULE D  
SECURED CREDITORS

(List all lienholders including those on real estate and mobile homes.)

<u>Full Name, Mailing Address, and Account Number of Each Creditor</u>	<u>Brief Description of Security for Each Debt</u>	<u>Monthly Payment</u>	<u>Total Amount Remaining Due Or Claimed</u>
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Total of D \$ \_\_\_\_\_

SCHEDULE E  
PRIORITY CREDITORS

	<u>Amount Due or Claimed</u>
_____ United States	\$ _____
_____ State of N.C.	\$ _____
_____ Local County Tax	\$ _____
_____ Local City Tax	\$ _____
_____ Other	\$ _____

Total of E \$ \_\_\_\_\_

SCHEDULE F  
UNSECURED CREDITORS

Full Name and Mailing Address of Each  
Creditor and Account Numbers

Total Amount Remaining  
Due or Claimed

Total of F            \$\_\_\_\_\_

NOTE: If additional space is needed, please identify schedule by letter (i.e., Schedule continued).

SCHEDULE G  
EXECUTORY CONTRACTS AND UNEXPIRED LEASES

<u>Name and Address of Parties to Lease or Contract</u>	<u>Description of Contract or Lease and Nature of Debtor's Interest, State Whether Lease is for Nonresidential Real Property</u>
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SCHEDULE H  
CODEBTORS

Name and Address  
of Codebtor

Name and Address  
of Creditor

NOTE: A party listed under Schedules G or H will not receive notice unless the party is also scheduled in the appropriate schedule of creditors.

SCHEDULE I  
CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a Chapter 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

	<u>Debtor</u>	<u>Spouse</u>
Employer:	_____	_____
Address:	_____	_____
Length of Employment	_____	_____
Position/Job	_____	_____

Debtor's Marital Status	Dependents of Debtor and Spouse		
	Names	Age	Relationship

	Debtor	Spouse
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Current monthly gross wages, salary, and commissions (pro rate if not paid monthly) . . . . .	\$ _____	\$ _____
Estimate monthly overtime . . . . .	\$ _____	\$ _____
<b>SUBTOTAL:</b> . . . . .	\$ _____	\$ _____
<b>LESS PAYROLL DEDUCTIONS</b>		
a. Payroll taxes and social security . . . . .	\$ _____	\$ _____
b. Insurance . . . . .	\$ _____	\$ _____
c. Union Dues . . . . .	\$ _____	\$ _____
d. Other (Specify) . . . . .	\$ _____	\$ _____
<b>SUBTOTAL OF PAYROLL DEDUCTIONS</b> . . . . .	\$ _____	\$ _____
<b>TOTAL NET MONTHLY TAKE HOME PAY</b> . . . . .	\$ _____	\$ _____
Regular income from operation of business or profession (attach detailed statement) . . . . .		
Income from real property . . . . .	\$ _____	\$ _____
Interest and dividends . . . . .	\$ _____	\$ _____
Alimony, maintenance or support payments payable to the Debtor for the debtor's use or that of dependents listed above) . .	\$ _____	\$ _____
Social Security or other government assistance (Specify) . . . . .	\$ _____	\$ _____
Pension or retirement income . . . . .	\$ _____	\$ _____
Other monthly income (Specify) . . . . .	\$ _____	\$ _____
<b>TOTAL NET MONTHLY INCOME</b> . . . . .	\$ _____	\$ _____
<b>TOTAL COMBINED NET MONTHLY INCOME</b> . . . . .		\$ _____

SCHEDULE J  
CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

	<u>Monthly</u>
Rent, mortgage payment or lot rent being paid directly by Debtor(s) not included in Chapter 13 payment . . . . .	\$ _____
Are real estate taxes included?        _____ Yes        _____ No	
Is property insurance included?        _____ Yes        _____ No	
Utilities: Electricity and heating fuel . . . . .	\$ _____
Water and Sewer . . . . .	\$ _____
Telephone . . . . .	\$ _____
Other . . . . .	\$ _____
Home maintenance (repairs and upkeep) . . . . .	\$ _____
Food (included lunches) . . . . .	\$ _____
Clothing . . . . .	\$ _____
Laundry and dry cleaning . . . . .	\$ _____
Medical and dental expenses . . . . .	\$ _____
Child Care . . . . .	\$ _____
Transportation (not including car payments) . . . . .	\$ _____
Recreation, clubs and entertainment, newspapers, magazines, etc. . . . .	\$ _____
Charitable Contributions . . . . .	\$ _____
Insurance (not deducted from wages or included in home mortgage payments):	
Homeowner's or renter's . . . . .	\$ _____
Life . . . . .	\$ _____
Health . . . . .	\$ _____
Auto . . . . .	\$ _____
Other . . . . .	\$ _____
Taxes (not deducted from wages or included in home mortgage payments) (specify) . . . . .	\$ _____
Alimony, maintenance, and support paid to others . . . . .	\$ _____
Payments for support of additional dependents not living at your home . . . . .	\$ _____
Regular expenses from operation of business, profession, or farm (attach detailed statement) . . . . .	\$ _____
Other . . . . .	\$ _____
 <b>TOTAL MONTHLY EXPENSES</b> . . . . .	 \$ _____

SUMMARY

<b>TOTAL (COMBINED) NET MONTHLY INCOME</b> . . . . .	\$ _____
<b>TOTAL MONTHLY EXPENSES</b> . . . . .	\$ _____
<b>AMOUNT OF CHAPTER 13 MONTHLY PAYMENT</b> . . . . .	\$ _____
<b>EXCESS INCOME AFTER EXPENSES &amp; CHAPTER 13 PAYMENT</b> . . . . .	\$ _____

#### PAYMENTS TO CREDITORS

List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600.00 to any creditor, made within 90 days (insiders 1 year) immediately preceding the commencement of this case. (Married debtors must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### FORECLOSURES, EXECUTIONS AND ATTACHMENTS

Is any of your or your spouse's property, including real estate, involved in foreclosing proceedings in or out of court? If so, identify the property and the person foreclosing.

Has any of you or your spouse's property or income been attached, garnished or seized under any legal or equitable process on or within 90 days before the date of the filing of the original petition herein? (If so, describe the property seized, or person garnished and at whose suit.)

#### TRANSFERS, REPOSSESSIONS AND RETURNS

Has any of you or your spouse's property been transferred, returned, repossessed, or seized by the seller or by any other party, including a landlord on or within 90 days before the date of the filing of the original petition herein? (If so, give particulars including the name and address of the party getting the property and its description and value.)

COMPENSATION PAID OR PROMISED TO ATTORNEY FOR DEBTOR

If you have paid or agreed to pay (or transferred or agreed to transfer any property) to your attorney for services in connection with your case other than agreeing to pay such compensation as may be allowed by the Court to be paid from monies paid to the Trustee or for your account, then state:

PENDING OR PRIOR BANKRUPTCY

What proceedings under the Bankruptcy Code are now pending or have been previously brought by or against you or your spouse? State the location of the Bankruptcy Court, the nature and number of each proceeding, the date it was filed, and whether a discharge was granted or refused, the proceeding was dismissed, or a composition, arrangement, or plan was confirmed.

PAYMENTS RELATED TO DEBT COUNSELING OR BANKRUPTCY

List all payments made or property transferred by or on behalf of the Debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.